

FEE TRANSMITTAL

Application Number 09/988,352

Art Unit 1616

Filing Date November 19, 2001

Confirmation No. 8761

Inventors Pallas, et al.

Examiner Name S. Mark Clardy

Attorney Docket Number MTC 6801 (39-21(53157A))

[] Applicant claims small entity status.

METHOD OF PAYMENT

The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

[X] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. [] BASIC FILING, SEARCH AND EXAMINATION FEES
(Type: _____) Subtotal (1) \$ _____

2. [] EXCESS CLAIM FEES

Total Claims ____ - ____ (HP) = ____ x Fee ____ = \$ _____

Indep Claims ____ - ____ (HP) = ____ x Fee ____ = \$ _____

Multiple Dependent Claims Fee \$ _____

(HP = highest number of claims paid for)

Subtotal (2) \$ _____

3. [] APPLICATION SIZE FEE

Total Pages ____ - 100 = ____ ÷ 50 = ____ x \$250 = \$ _____

(Application + Drawings)

(round up to whole #)

Subtotal (3) \$ _____

4. [X] OTHER FEE(S)

[X] 2 month extension of time

[] Information disclosure statement

[] 37 CFR 1.17(q) processing fee

[] Non-English specification

[] Notice of Appeal


[] Filing a brief in support of appeal

[] Request for oral hearing

[] Other: _____

Subtotal (4) \$ 450.00

TOTAL AMOUNT OF PAYMENT \$ 450.00


James D. Harper, Reg. No. 51,781
Telephone: 314-231-5400

December 9, 2004

Date

JDH/kll

Express Mail Label No. EV 432651128 US

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